

## **BUILDING & NEIGHBORHOOD SERVICES**

Phone 615-794-701	2		Franklin, Tennessee		Fax	x 615-591-9066	
	Non R	esident	ial Building Permit Ap	plicatio	n	revised 7/27/1	
Prop Owner:			Applicant/Tenant:				
Address:			Address:				
Contact Person:							
City:	State:	Zip:	City:	9	State:	Zip:	
Phone:	E:Mail:		Phone:	E-Ma	il		
Contractor:			Design Firm:				
State License #:			Address:				
Address:			City:	,	State:	Zip:	
City:	State:	Zip:	Phone:				
Phone:			Designer of recor	d or Cont	act:		
Contact Person:			Contact Person:				
Email:			E-Mail:				
Project Name:							
Project Street Address:				Suite #:			
Project Lot Number	: Sec	tion #:	Subdivision:				
Occupancy Use Classification:			Former U	Former Use:			
Total Square Footag	e:	Stories:	Basement:	Heig	ght:		
Construction Cost:			WITHIN FLOOD	PLAIN:	$\Box$ Yes	$\square$ No	
4 Sets Plans (Requir	red): 🗆 Yes	□No	Spec Book:	□ Yes		No	
Contractors applying to Tennessee State Contrinsurance is also requi	for permits of practor's Licens red.	projects we appropr	ss accompanied by complete path contract value of \$25,000 contract to the value and in the fiel	or more are	to be dor	ne. A certificate of	
orgineu.				_ Date			
CONSTRUCTION  DANGED ADDITION			NANT BUILDOUT   ONLY TION	OTHER			

\* Provide the project number established by the Planning Department when site plan was submitted for Planning Commission approval. This is a required field for new construction.